

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

§1. High Risk Pregnant Women and Children.

- A. Target Group: To reimburse case management services for high-risk Medicaid eligible pregnant women and children up to age 1.
- B. Areas of State in which services will be provided:
- ☒ Entire State
- ☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:
- C. Comparability of Services
- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.
- D. Definition of Services: The case management services will provide maternal and child health coordination to minimize fragmentation of care, reduce barriers, and link clients with appropriate services to ensure comprehensive, continuous health care. The Maternity Care Coordinator will provide:
1. Assessment-Determining clients' service needs, which include psychosocial, nutrition, medical, and educational factors.
 2. Service Planning-Developing an individualized description of what services and resources are needed to meet the service needs of the client and help access those resources.
 3. Coordination & Referral-Assisting the client in arranging for appropriate services and ensuring continuity of care.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

4. Follow-up & Monitoring-Assessing ongoing progress and ensuring services are delivered.
 5. Education & Counseling-Guiding the client and developing a supportive relationship that promotes the service plan.
- E. Qualifications of Providers: Any duly enrolled provider which the department determines is qualified who has signed an agreement with Department of Medical Assistance Services to deliver Maternity Care Coordination services. Qualified service providers will provide case management regardless of their capacity to provide any other services under the Plan. A Maternity Care Coordinator is the Registered Nurse or Social Worker employed by a qualified service provider who provides care coordination services to eligible clients. The RN must be licensed in Virginia and should have a minimum of one year of experience in community health nursing and experience in working with pregnant women. The Social Worker (MSW, BSW) must have a minimum of one year of experience in health and human services, and have experience in working with pregnant women and their families. The Maternity Care Coordinator assists clients in accessing the health care and social service system in order that outcomes which contribute to physical and emotional health and wellness can be obtained.
- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of §1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.
- §2. Seriously mentally ill adults and emotionally disturbed children.
- A. Target Group: The Medicaid eligible individual shall meet the DMHMRSAS definition for "serious mental illness", or "serious emotional disturbance in children and adolescents".
1. An active client for case management shall mean an individual for whom there is a plan of care in effect which requires regular direct or client-related contacts or communication or activity with the client, family, service providers, significant others and others including at least one face-to-face contact every 90-days. Billing can be submitted for an active client only for months in which direct or client-related contacts, activity or communications occur

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

2. There shall be no maximum service limits for case management services except case management services for individuals residing in institutions or medical facilities. For these individuals, reimbursement for case management shall be limited to thirty days immediately preceding discharge. Case management for institutionalized individuals may be billed for no more than two predischARGE periods in 12 months.

B. Areas of State in which services will be provided:

- ☒ Entire State
- ☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services

- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services: Mental health services. Case management services assist individual children and adults, in accessing needed medical, psychiatric, social, educational, vocational, and other supports essential to meeting basic needs. Services to be provided include:

1. Assessment and planning services, to include developing an Individual Service Plan (does not include performing medical and psychiatric assessment but does include referral for such assessment);
2. Linking the individual to services and supports specified in the individualized service plan;
3. Assisting the individual directly for the purpose of locating, developing or obtaining needed services and resources;

TN No. 91-08

Approval Date 11-21-91

Effective Date 07-01-91

Supersedes

TN No. 90-12

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

4. Coordinating services and service planning with other agencies and providers involved with the individual.
5. Enhancing community integration by contacting other entities to arrange community access and involvement, including opportunities to learn community living skills, and use vocational, civic, and recreational services;
6. Making collateral contacts with the individuals' significant others to promote implementation of the service plan and community adjustment;
7. Follow-up and monitoring to assess ongoing progress and to ensure services are delivered; and
8. Education and counseling which guides the client and develops a supportive relationship that promotes the service plan.

E. Qualifications of Providers:

1. Services are not comparable in amount, duration, and scope. Authority of §1915(g)(1) of the Act is invoked to limit case management providers for individuals with mental retardation and individuals with serious/chronic mental illness to the Community Services Boards only to enable them to provide services to serious/chronically mentally ill or mentally retarded individuals without regard to the requirements of §1902(a)(10)(B) of the Act.
2. To qualify as a provider of services through DMAS for rehabilitative mental health case management, the provider of the services must meet certain criteria. These criteria shall be:
 - a. The provider must guarantee that clients have access to emergency services on a 24 hour basis;
 - b. The provider must demonstrate the ability to serve individuals in need of comprehensive services regardless of the individual's ability to pay or eligibility for Medicaid reimbursement;
 - c. The provider must have the administrative and financial management capacity to meet state and federal requirements;
 - d. The provider must have the ability to document and maintain individual case records in accordance with state and federal requirements;

TN No. 91-08
Supersedes
TN No. 90-12

Approval Date 11-21-91

Effective Date 07-01-91

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

- e. The services shall be in accordance with the Virginia Comprehensive State Plan for Mental Health, Mental Retardation and Substance Abuse Services; and
 - f. The provider must be certified as a mental health case management agency by the DMHMRSAS.
3. Providers may bill Medicaid for mental health case management only when the services are provided by qualified mental health case managers. The case manager must possess a combination of mental health work experience or relevant education which indicates that the individual possesses the following knowledge, skills, and abilities. The incumbent must have at entry level the following knowledge, skills and abilities. These must be documented or observable in the application form or supporting documentation or in the interview (with appropriate documentation).
- a. Knowledge of:
 - (1) the nature of serious mental illness in adults and serious emotional disturbance in children and adolescents
 - (2) treatment modalities and intervention techniques, such as behavior management, independent living skills training, supportive counseling, family education, crisis intervention, discharge planning and service coordination
 - (3) different types of assessments, including functional assessment, and their uses in service planning
 - (4) consumers' rights
 - (5) local community resources and service delivery systems, including support services (e.g. housing, financial, social welfare, dental, educational, transportation, communication, recreational, vocational, legal/advocacy), eligibility criteria and intake processes, termination criteria and procedures, and generic community resources (e.g. churches, clubs, self-help groups)
 - (6) types of mental health programs and services

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

- (7) effective oral, written and interpersonal communication principles and techniques
- (8) general principles of record documentation
- (9) the service planning process and major components of a service plan
- b. Skills in:
 - (1) interviewing
 - (2) observing, recording and reporting on an individual's functioning
 - (3) identifying and documenting a consumer's needs for resources, services and other supports
 - (4) using information from assessments, evaluations, observation and interviews to develop service plans
 - (5) identifying services within the community and established service system to meet the individual's needs
 - (6) formulating, writing and implementing individualized service plans to promote goal attainment for persons with serious mental illness and emotional disturbances
 - (7) negotiation with consumers and service providers
 - (8) coordinating the provision of services by diverse public and private providers
 - (9) identifying community resources and organizations and coordinating resources and activities
 - (10) using assessment tools (e.g. level of function scale, life profile scale)
- c. Abilities to:
 - (1) demonstrate a positive regard for consumers and their families (e.g. treating consumers as individuals, allowing risk taking, avoiding stereotypes of people with mental illness, respecting consumers' and families' privacy, believing consumers are valuable members of society)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

- (2) be persistent and remain objective
 - (3) work as a team member, maintaining effective inter- and intra-agency working relationships
 - (4) work independently, performing position duties under general supervision
 - (5) communicate effectively, verbally and in writing
 - (6) establish and maintain ongoing supportive relationships
 - F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of §1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the providers of case management services.
 - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
 - G. Payment for case management services under the plan does not duplicate payments made to public agencies of private entities under other program authorities for this same purpose.
- §3. Youth at risk of serious emotional disturbance.
- A. Target Group: Medicaid eligible individuals who meet the DMHMRSAS definition of youth at risk of serious emotional disturbance.
 - 1. An active client shall mean an individual for whom there is a plan of care in effect which requires regular direct or client-related contacts or communication or activity with the client, family, service providers, significant others and others including at least one face-to-face contact every 90-days. Billing can be submitted for an active client only for months in which direct or client-related contacts, activity or communications occur.
 - 2. There shall be no maximum service limits for case management services except case management services for individuals residing in institutions or medical facilities. For these individuals, reimbursement for case management shall be limited to thirty days immediately preceding discharge. Case management for institutionalized individuals may be billed for no more than two predischARGE periods in 12 months.
 - B. Areas of State in which services will be provided:
 - ☒ Entire State
 - ☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

TN No. 93-18
Supersedes
TN No. 92-24

Approval Date 08-05-93

Effective Date 06-29-93

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

C. Comparability of Services

- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services: Mental health services. Case management services assist youth at risk of serious emotional disturbance in accessing needed medical, psychiatric, social, educational, vocational, and other supports essential to meeting basic needs. Services to be provided include:

1. Assessment and planning services, to include developing an Individual Service Plan;
2. Linking the individual directly to services and supports specified in the treatment/services plan;
3. Assisting the individual directly for the purpose of locating, developing or obtaining needed service and resources;
4. Coordinating services and service planning with other agencies and providers involved with the individual;
5. Enhancing community integration by contacting other entities to arrange community access and involvement, including opportunities to learn community living skills, and use vocational, civic, and recreational services;
6. Making collateral contacts which are non-therapy contacts with an individual's significant others to promote treatment and/or community adjustment;
7. Following-up and monitoring to assess ongoing progress and ensuring services are delivered; and
8. Education and counseling which guides the client and develops a supportive relationship that promotes the service plan.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

E. Qualifications of Providers

1. To qualify as a provider of case management services to youth at risk of serious emotional disturbance, the provider of the services must meet certain criteria. These criteria shall be:
 - a. The provider must guarantee that clients have access to emergency services on a 24 hour basis;
 - b. The provider must demonstrate the ability to serve individuals in need of comprehensive services regardless of the individual's ability to pay or eligibility for Medicaid reimbursement;
 - c. The provider must have the administrative and financial management capacity to meet state and federal requirements;
 - d. The provider must have the ability to document and maintain individual case records in accordance with state and federal requirements;
 - e. The services shall be in accordance with the Virginia Comprehensive State Plan for Mental Health, Mental Retardation and Substance Abuse Services; and
 - f. The provider must be certified as a mental health case management agency by the DMHMRSAS.
2. Providers may bill Medicaid for mental health case management to youth at risk of serious emotional disturbance only when the services are provided by qualified mental health case managers. The case manager must possess a combination of mental health work experience or relevant education which indicates that the individual possesses the following knowledge, skills, and abilities. The incumbent must have at entry level the following knowledge, skills and abilities. These must be documented or observable in the application form or supporting documentation or in the interview (with appropriate documentation).
 - a. Knowledge of:
 - (1) the nature of serious mental illness in adults and serious emotional disturbance in children and adolescents
 - (2) treatment modalities and intervention techniques, such as behavior management, independent living skills training, supportive counseling, family education, crisis intervention, discharge planning and service coordination

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

- (3) different types of assessments, including functional assessment, and their uses in service planning
 - (4) consumer's rights
 - (5) local community resources and service delivery systems, including support services (e.g. housing, financial, social welfare, dental, educational, transportation, communication, recreational, vocational, legal/advocacy), eligibility criteria and intake processes, termination criteria and procedures, and generic community resources (e.g. churches, clubs, self-help groups)
 - (6) types of mental health programs and services
 - (7) effective oral, written and interpersonal communication principles and techniques
 - (8) general principles of record documentation
 - (9) the service planning process and major components of a service plan
- b. Skills in:
- (1) interviewing
 - (2) observing, recording and reporting on an individual's functioning
 - (3) identifying and documenting a consumer's needs for resources, services and other supports
 - (4) using information from assessments, evaluations, observation and interviews to develop service plans
 - (5) identifying services within the community and established service system to meet the individual's needs
 - (6) formulating, writing and implementing individualized service plans to promote goal attainment for persons with serious mental illness and emotional disturbances
 - (7) negotiating with consumers and service providers
 - (8) coordinating the provision of services by diverse public and private providers